

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:

Robert A. York

**APPLICATION NO.:** 

10/765,578

FILING DATE:

January 26, 2004

TITLE:

Voltage-Variable Capacitor with Increased Current

Conducting Perimeter

**EXAMINER:** 

Junghwa M. Im

**GROUP ART UNIT:** 

2811

ATTY. DKT. NO.:

22994-08791

## **CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:

Dated: DEC. 29, 2005

Michael W. Farn, Reg. No. 41,015

MAIL STOP AF COMMISSIONER FOR PATENTS P.O. BOX 1450 **ALEXANDRIA, VA 22313-1450** 

## NOTICE OF APPEAL

SIR:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the Primary Examiner, mailed June 30, 2005, finally rejecting claims 1-23.

Pursuant to 37 CFR § 1.17(e), enclosed is payment in the amount of \$730 for the filing of the Notice of Appeal and a three-month extension of time to respond.

Respectfully submitted,

Dated: DET. 29, 2005

Michael W. Farn, Reg. No. 41,015

Fenwick & West LLP Silicon Valley Center 801 California Street

Mountain View, CA 94041

Tel.: (650) 335-7823 Fax: (650) 938-5200



Express Mail Mailing Number (optional):



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TA TRADE	TRAUCHAR		10/765,578			
TRANSMITTAL FORM  (to be used for all correspondence during pendency of filed application)		Filing Date	January 26, 2004			
		First Named Inventor	Robert A. York			
		Group Art Unit Number	2811			
		Examiner Name	Junghwa M. Im			
Total Number of Pages in This Submiss	sion 4	Attorney Docket Number	22994-08791			
EN	ICLOSURES	(check all that apply	<u>/)</u>			
Fee Transmittal Form (in duplicate	g Parts Sheet  & PTO/SB/08A erences ipt d Assignment	Issue Fee Transi Letter to Chief Di Formal Drawing(	raftsperson s): s) of Figure(s) [ ication to Board ication to Group Brief, Reply Brief Priority Docum Communication	d of Appeals and p ef) eent(s)		
Revocation and Substitute Power	of Attorney	LJ				
REMARKS:	-					
, SIG	NATURE OF	ATTORNEY OR AGE	NT			
Signature: Welfael						
Attorney/Reg. No.: Michael W. Farn		5	Dated:	December 29, 2005		
CERTIFICATE OF MAILING						
I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office of Addressee" service pursuant to 37 CFR 1.10.						
Signature: Welker W.						
Typed or Printed Name: Michael W	. Farn		Dated:	December 29, 2005		

## **TRANSMITTAL** for FY 2005

Patent fees are subject to annual revision. Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT | (\$) 730

Complete if Known					
Application Number	10/765,578				
Filing Date	January 26, 2004				
First Named Inventor	Robert A. York				
Examiner Name	Junghwa M. Im				
Art Unit	2811				
Attorney Docket No.	22994-08791				

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)						
☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None     ☐ Deposit Account:		3. ADDITIONAL FEES						
Deposit Account Number 19-2	555	Large E	Entity	Small	<u>Entity</u>	Fee Description	Fee Paid	
Deposit Account Name Fen	wick & West LLP	Fee Code	Fee (\$)	Fee Code	Fee (\$)			
The Commissioner is authorized to  ☐ Charge fee(s) indicated below  ☐ Charge all required fee(s) or any under 37 CFR §1.16 or §1.17 du application	Credit any overpayments underpayment of fee(s) due	1051 1052 1053 1812	130 50 130 2,520	2051 2052 1053 1812	65 25 130	Surcharge - late filing fee or oath or declaration Surcharge - late provisional filing fee or cover sheet Non-English specification For filing a request for ex parte reexamination		
Charge fee(s) indicated below, e		1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
the above-identified deposit account.  FEE CALCULATION		1805 1251	1,840* 120	1805 2251	1,840* 60	Requesting publication of SIR after Examiner action Extension for reply within first month		
1. BASIC FILING FEE	ATION	1251	450	2252	225	Extension for reply within second month		
Large Entity Small Entity		1253	1020	2252	510	Extension for reply within third month	510	
" "  "	escription Fee Paid	1254	1,590	2254	795	Extension for reply within fourth month		
Code (\$) Code (\$)		1255	2,160	2255	1,080	Extension for reply within fifth month		
		1401	500	2401	250	Notice of Appeal	250	
		1402	500	2402	250	Filing a brief in support of an appeal		
	<u> </u>	1403	1000	2403	500	Request for oral hearing		
		1451	1,510	1451	1,510	Petition to institute a public use proceeding		
I		1452	500	2452	250	Petition to revive - unavoidable		
SUBTOTAL (1)	(\$) -0-	1453	1,500	2453	750	Petition to revive - unintentional		
2. EXTRA CLAIM FEES FOR U		1501	1,400	2501	700	Utility issue fee (or reissue)		
Extra Claims	Fee from Fee Paid below	1502	800	2502	400	Design issue fee		
Total Claims -20**= X	=	1503	1100	2503	550	Plant issue fee		
Independent Claims 3** = X	=	1460		1460		Petitions to the Director		
Multiple Dependent	=	1807	50	1807	50	Processing fee for Provisional Applications		
Large Entity Small Entity		1806	180	1806	180	Submission of Information Disclosure Stmt		
Fee Fee Code (\$)	<u>scription</u>	8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
1202 50 2202 25 Claims	in excess of 20	1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))		
1201 200 2201 100 Indepen	ndent claims in excess of 3	1810	790	2810	395	For each additional invention to be examined (37 CFR 1.129(b))		
1203 360 2203 180 Multiple	dependent claim, if not paid	1801	790	2801	395	Request for Continued Examination (RCE)		
	ue independent claims over al patent	1802	900	1802	900	Request for expedited examination of a design application		
1205 50 2205 25 **Reissue claims in excess of 20 and over original patent		Other fee (specify)						
SUBTOTAL (2)	(\$) -0-					SUBTOTAL (3) (\$) 730		
or number previously paid, if greater; F	For Reissues, see above	•Reduce	ed by Basi	c Filing F	ee Paid			

SUBMITTED BY	Complete (if applicable)					
Name (Print/Type)	Michael W. Farn	Registration No. (Attorney/Agent) 41,015	Telephone (650) 335-7823			
Signature	MichaelWo		Date	DET.	29	, 2005

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